

Idaho Medicaid Therapy Providers Meeting Minutes

Date / Time of Meeting	Friday, December 21, 2018 10:30 am — 12:00 pm	
Location	Conference Room D-West, 3232 Elder St, Boise, ID	
Medicaid Participants	Provider Participants	DXC Participants
William Deseron	Tammy Emerson, ISHA	Kristi Harris
Tracy Lombard	Mandy Ovitt-Lee	Ivy Abel
Susan Scheuerer	Tara Toone	Darla Callaway
Jayme Salvadori	Kayla Herrera, Kaleidoscope Pediatric Therapy	Natasha Derrick
	Sara Hulsizer, Kaleidoscope Pediatric Therapy	Kristi Irby
	Megan Wiskirchen, Kaleidoscope Pediatric Therapy	Robert Hughes
	Herb Sandoval, Chatterbox Pediatric Therapy Center	Rainy Natal
	Stephanie, Infant Toddler Program	
	Kimberly List, OT	
	Karla Brown, IOTA	
	Sarah Gilbert	
	April Ward, ISHA and Idaho Elks Hearing & Balance	
	Abby, Saint Luke's	

Meeting Content

Topics Discussed	Action Item	Responsible
Welcome and Introductions – William Deseron		
<p>Meeting Administration</p> <p>Determined meeting frequency would remain quarterly.</p> <p>Agenda solicitations will be well in advance (approximately a month) to allow for posting in the newsletter.</p> <p>Meeting contact change to MCPT@dhw.idaho.gov.</p>	Send 2019 meeting invites.	William Deseron
<p>2019 Therapy Caps</p> <p>Idaho Medicaid is aligning with Medicare caps of \$2,040.</p>		
<p>Provider Feedback – Webpages</p> <p>www.idmedicaid.com; www.medunit.dhw.idaho.gov</p> <p>No comments received.</p>		
<p>Provider Feedback – Provider Handbook</p> <p>Should the handbook be consolidated into one for OT, PT, SLP and Audiology? The group consensus is yes.</p>	Will consolidate handbooks.	William Deseron
<p>Medicare Therapy Modifiers – GP, GO and GN</p> <p>Therapy Modifiers – GP, GO and GN (speech) show the plan of care services are rendered under. Code overlap makes it difficult to determine what service is being rendered.</p> <p>Two new modifiers are coming for assistants. They won't be required by Medicare until 2020. Providers are encouraged to follow Noridian for updates on changes.</p> <p>Most therapists bill Medicare and are already using the modifiers or their billers are. Change will be announced in advance of implementation.</p>	Update system and provide communications in advance of implementing system.	William Deseron

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<p>Duplication of services definition</p> <p>Article is in the January MedicAide Newsletter with definition to go into the handbook. Definition is based-off of IDAPA 16.03.09. E-mail us with comments.</p>		
<p>Goal Attainment Scale (GAS)</p> <p>Can therapists use the Goal Attainment Scale (GAS) and submit this to Medicaid for Progress Reports? Medicaid will accept if it meets Noridian requirements.</p>		
<p>Hippotherapy for Cerebral Palsy</p> <p>Providers may submit requests through EPSDT.</p>	<p>A meeting will be scheduled to formalize criteria with providers that have expressed interest.</p>	<p>Michael Case</p>
<p>Sensory Integration</p> <p>Medicaid provided feedback on articles. Studies are still too small of a scale to clinically determine benefits and harms. Blue Cross doesn't cover due to current lack of research. Clinicaltrials.gov doesn't show studies that are currently published that would support coverage.</p> <p>Aetna sensory therapy handout.</p> <p>United Healthcare also has handout.</p> <p>Having a commercial insurance cover it as a part of their standard plan is helpful as it builds the practice into a standard of care. Other insurance coverage isn't applicable, because employers can buy normally noncovered services as an extra perk for their employees.</p> <p>Medicaid may consider a waiver for autism services in the future. Currently Medicaid Expansion is underway.</p>		
<p>Group Therapy</p> <p>Most of the surrounding states cover, but require a PA. Mechanism for coverage is unknown, but may be a waiver. Currently IDAPA 16.03.09 prohibits coverage specifically except for school-based services.</p> <p>Sarah with Kaleidoscope said group therapy is more cost effective. Children can't always effectively utilize therapy in individual sessions.</p> <p>Service might be covered under DD waiver. Options providers may look into are EPSDT requests, Division of Behavioral Health, or working with OPTUM to utilize community-based rehabilitation services.</p>	<p>Send clinical reviews of individual versus group therapy outcomes to MCPT@dhw.idaho.gov.</p>	<p>Tammy Emmerson</p>
<p>Speech Generating Devices</p>	<p>Can trials be paid for?</p>	<p>William Deseron</p>

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<p>Tammy Emerson and Susan Scheuerer are working on revising the request form.</p> <p>If a Dynavox product breaks during a trial then the family is charged. It hasn't happened yet that therapists are aware. Currently the trial isn't paid for by Medicaid. Could it be? Same with hearing aids for cochlear implants.</p> <p>Topic was not thoroughly discussed due to time.</p>		
<p>Incomplete evaluations due to child behaviors.</p> <p>Can we be reimbursed for partial evaluations? Evaluations can only be billed after being completed. Evaluations do not have to be completed in the same session, and may span multiple sessions. Only one can be billed regardless of the number of sessions used.</p> <p>Topic was not thoroughly discussed due to time.</p>	<p>Can participants be billed for incomplete evaluations?</p>	<p>William Deseron</p>
<p>November MedicAide Article: Feeding Therapy</p> <p>Topic was not discussed due to time. Providers interested in discussing between meetings are welcome to e-mail MCPT@dhw.idaho.gov.</p>	<p>William will e-mail identified interested parties with IOTA feedback for discussion.</p>	<p>William Deseron</p>